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Bib Data Sheet

CONFIRMATION NO. 7887

|                                    |   |                     |                               |  |
|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>09/987,961 | <b>FILING DATE</b><br>11/16/2001<br><b>RULE</b> | <b>CLASS</b><br>382 | <b>GROUP ART UNIT</b><br>2621 | <b>ATTORNEY DOCKET NO.</b><br>024938-00001 |
|------------------------------------|---|---------------------|-------------------------------|--|

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 2001-219096 07/19/2001

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 12/04/2001

|  |                                  |                             |                           |                                |
|--|----------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>10 | <b>TOTAL CLAIMS</b><br>20 | <b>INDEPENDENT CLAIMS</b><br>4 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                  |                             |                           |                                |
| Verified and Acknowledged<br>Examiner's Signature _____ Initials _____   |                                  |                             |                           |                                |

**ADDRESS**

ARENT FOX KINTNER PLOTKIN & KAHN, PLLC  
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**TITLE**

Pattern identification apparatus, pattern identification method, and pattern identification program

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>824 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
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